

## KKM perkukuh pemeriksaan kesihatan

**BAGAN DATUK** - Kementerian Kesihatan Malaysia (KKM) belum merancang mewujudkan program khusus berkaitan kesihatan bakal jemaah haji bagi memenuhi syarat terbaharu ditetapkan kerajaan Arab Saudi.

Menterinya, Datuk Seri Dr Dzulkefly Ahmad berkata, ini kerana kementerian itu sudah melaksanakan pelbagai prosedur pemeriksaan dan saringan kesihatan secara rutin setiap tahun.

Menurutnya, segala keperluan berkaitan kesihatan jemaah haji telah pun menjadi amalan tetap KKM dan agensi berkaitan bagi memastikan jemaah berada dalam keadaan terbaik sebelum berangkat ke Tanah Suci.

"Ini memang kegiatan tahunan kami. Saringan kesihatan dan pemeriksaan dilakukan sehingga ke saat akhir sebelum jemaah berangkat.

"Kita lihat dari sudut penyakit kronik seperti kencing manis, darah tinggi, berat badan dan sebagainya. Semua ini ada pemeriksaan kita buat secara rutin dan kita akan terus mempertingkatkan usaha tersebut," katanya.

Beliau berkata demikian ketika ditemui pemberita selepas



Dzulkefly (dua dari kanan) bersama Ahmad Zahid (tiga dari kanan) melawat ruang pameran sempena Program Jelajah ANMS: MOH Kita Sihat di Dewan Dato' Lope Hashim pada Ahad.

menghadiri Program Jelajah Agenda Nasional Malaysia Sihat (ANMS): MOH Kita Sihat di Dewan Dato' Lope Hashim di sini pada Ahad.

Program tersebut disempurnakan Timbalan Perdana Menteri merangkap Ahli Parlimen Bagan Datuk, Datuk Seri Dr Ahmad Zahid Hamidi.

Dzulkefly berkata, pendekatan yang diamalkan Malaysia ketika ini terbukti berkesan kerana negara mencatatkan kadar ke-

matian jemaah haji yang jauh lebih rendah berbanding beberapa negara lain.

Jelasnya, keutamaan KKM adalah memastikan semua jemaah haji menerima penilaian kesihatan menyeluruh lebih awal supaya sebarang risiko dapat ditangani sebelum perjalanan menunaikan ibadah haji.

Katanya, langkah berterusan itu memastikan kebajikan dan keselamatan jemaah haji sentiasa berada pada tahap optimum.

## SAUDI REQUIREMENTS

# Dzulkefly: No new health checks for haj pilgrims

**BAGAN DATUK:** The Health Ministry has no plans to introduce a programme to screen the health of prospective pilgrims despite the latest requirements set by the Saudi government.

Minister Datuk Seri Dr Dzulkefly Ahmad said the ministry already conducted screenings and examinations of pilgrims annually.

“Ensuring that all health-related requirements for pilgrims are in order has long been standard practice by the ministry and relevant agencies to ensure that pilgrims are in the best possible condition before departing for the Holy Land.

“We will continue providing early healthcare through screenings and examinations.

“Malaysia has adopted adequate healthcare approaches for prospective pilgrims, and we will continue to boost their care even before departure.”

Dzulkefly said this after attend-

ing a running event at the Sultan Nazrin Shah Bridge here, which was flagged off by Deputy Prime Minister Datuk Seri Dr Ahmad Zahid Hamidi.

On whether there were any programmes to ensure pilgrims were fit for the haj, he said screenings were conducted up to the final moments.

“We screen for diabetes, high blood pressure and weight issues. These are routine checks, and we will continue to strengthen these efforts.”

He said the screenings included pilgrims with disabilities and wheelchair users.

“Even without special allocations, every prospective pilgrim has the right to perform the haj, and we provide the facilities to support them.”

Earlier, Zahid said prospective pilgrims must meet regulations set by Lembaga Tabung Haji (TH).

“It’s not just about health. It’s



*Datuk Seri Dr Dzulkefly Ahmad*

also about having sufficient savings to perform the haj.

“However, in my view, a sound mind resides in a healthy body.”

On Oct 19, TH said Saudi Arabia had set a requirement that prospective pilgrims must be free of infectious diseases and uncontrollable chronic illnesses to qualify for a haj visa starting next year.

The TH Treatment Centre in Makkah will also be discontinued.

TH group managing director and chief executive officer Mustakim Mohamad on Saturday said the protocols would be enforced by TH and must be followed by Malaysian pilgrims to obtain a haj visa.

Pilgrims will be required to have the physical ability to perform haj rituals independently.

# KKM kekal kaedah saringan kesihatan bakal jemaah haji

**Bagan Datuk:** Kementerian Kesihatan (KKM) mengekalkan kaedah pemeriksaan kesihatan untuk bakal jemaah haji walaupun Arab Saudi mengadakan syarat baharu bagi mereka yang mahu menunaikan ibadah itu.

Menterinya, Datuk Seri Dr Dzulkefly Ahmad, berkata Kementerian sudah melaksanakan pemeriksaan dan saringan kesihatan rutin setiap tahun bagi jemaah haji.

“Semua keperluan berkaitan kesihatan jemaah haji sudah lama menjadi amalan standard Kementerian Kesihatan serta agensi terlibat bagi memastikan jemaah berada dalam keadaan terbaik sebelum berangkat ke Tanah Suci.

“Kami akan terus menyedaiakan penjiagaan kesihatan

awal melalui saringan berkala, kerana ia penting.

“Malaysia sudah mengamalkan pendekatan kesihatan yang mencukupi untuk bakal jemaah haji dan kita akan terus meningkatkan tahap penjagaan sebelum mereka berlepas,” katanya.

Dr Dzulkefly berkata demikian selepas menghadiri acara larian di Jambatan Sultan Nazrin Shah yang pelepasannya disempurnakan oleh Timbalan Perdana Menteri, Datuk Seri Dr Ahmad Zahid Hamidi.

Menjawab sama ada terdapat program khusus bagi memastikan jemaah benar-benar sihat, beliau berkata saringan dijalankan sehingga saat akhir, dengan usaha penambahbaikan berterusan.

“Kami menjalankan saringan

membabitkan penyakit kronik seperti kencing manis, tekanan darah tinggi dan masalah berat badan.

“Ini adalah pemeliharaan rutin dan kami akan memperkukuhkannya,” katanya.

Beliau turut memaklumkan saringan merangkumi jemaah berkeperluan khas termasuk pengguna kerusi roda, bagi memastikan mereka mampu menunaikan ibadah haji.

“Walaupun tanpa peruntukan khas, setiap jemaah berhak menyedaiakan haji dan kita menyedaiakan kemudahan sewajarnya



Dzulkefly Ahmad

untuk menyokong mereka,” tambahnya.

Sementara itu, Ahmad Zahid mengemukakan bakal jemaah haji perlu mematuhi peraturan ditetapkan Tabung Haji (TH).

“Bukan sahaja soal kesihatan, tetapi juga kewangan mencukupi untuk menunaikan haji.

“Namun bagi saya, akal yang cerdas hadir daripada tubuh yang sihat,” katanya.

Mulai 21 Oktober lalu, bakal jemaah haji mesti bebas daripada penyakit berjangkit serta penyakit kronik atau tidak terkawal bagi melayakkan mereka

menerima visa haji bermula tahun depan.

Syarat baharu itu diumumkan oleh Kementerian Haji dan Umrah Arab Saudi bagi musim haji 1447H / 2026M, termasuk penamatan operasi Pusat Rawatan Tabung Haji di Tanah Suci.

Pengarah Urusan Kumpulan dan Ketua Pegawai Eksekutif TH, Mustakim Mohamad, berkata protokol itu akan dikuatkuasakan TH dan mesti dipatuhi jemaah Malaysia untuk mendapatkan visa.

Antara syarat utama ialah jemaah mesti bebas daripada penyakit berjangkit, penyakit kronik yang serius atau tidak terkawal, dan mempunyai keupayaan fizikal untuk menunaikan semua ibadah haji secara berikari.

# Health Ministry mobilises flood response teams

**PUTRAJAYA:** With the north-east monsoon set to bring months of heavy rain and flooding, the Health Ministry has activated its highest level of preparedness.

It said putting clinics and hospitals nationwide on high alert is crucial to ensure the continuity of health services for flood victims and to reduce public health risks.

With heavy rains expected until March next year, the ministry said all state health departments and district health offices have taken a series of proactive steps

under a comprehensive action plan.

"Primary health clinics and hospitals have been placed on high alert with adequate manpower, equipment and logistics."

"Alternative facilities have also been identified to ensure services continue if any main facilities are affected by floods."

"All logistics and assets, including vehicles, medical equipment and emergency supplies, have been updated and are ready for mobilisation at any time," it said in a statement yesterday.

The ministry also said that all medicine stocks at health facilities are currently sufficient for at least three months.

"Specialised units under the ministry's Emergency Medical Team, including the Rapid Assessment Team, Rapid Response Team, Medical Emergency Response Team, and Mental Health and Psychosocial Support are ready for deployment."

"These teams will conduct health assessments, provide treatment at temporary evacuation centres, monitor infectious dis-

eases, carry out environmental inspections and offer psychosocial support.

"All identified evacuation centres have been inspected for suitability, safety and cleanliness before activation."

"Sanitation activities and flood simulation drills have also been carried out at health facilities," it added.

The ministry also said that it will continue to work closely with other agencies to safeguard the health and well-being of affected communities.

It reminded residents in flood-prone areas to prepare emergency bags, secure important documents and ensure their medication supply is adequate.

"Move early to avoid accidents and loss of life. During floods, avoid fast-flowing water, ensure clean food and water, maintain hygiene and seek immediate treatment if you experience symptoms of illness," it said.

More information on flood-related disease prevention is available on the ministry's official website and social media pages.

## KKM laksana Pelan Tindakan Komprehensif

**Putrajaya:** Kementerian Kesihatan Malaysia (KKM) melaksanakan Pelan Tindakan Komprehensif untuk memastikan kesinambungan perkhidmatan kesihatan awam sepanjang musim Monsun Timur Laut (MTL) yang bermula pada 13 November lalu dan dijangka berterusan hingga Mac 2026.

Menurut kenyataan KKM semalam, pelan tindakan itu digerakkan melalui Jabatan Kesihatan Negeri (JKN) dan Pejabat Kesihatan Daerah (PKD) bagi memastikan kesiapsiagaan pada semua peringkat untuk menjamin perkhidmatan berterusan dan ketersediaan bantuan.

KKM memaklumkan pelan tindakan terbabit merangkumi jaminan kesinambungan perkhidmatan, penggerakan pasukan perubatan kecemasan (EMT) dan kawalan kesihatan awam serta pemantauan di pusat pemindahan sementara (PPS).

Menurut KKM, fasiliti kesihatan primer dan hospital berada pada tahap kesiapsiagaan optimum dengan tenaga kerja, perala-

tan dan logistik yang mencukupi serta fasiliti alternatif dikenal pasti bagi memastikan perkhidmatan kesihatan tidak terjejas sekiranya fasiliti utama alami gangguan banjir.

Selain itu, KKM menjelaskan semua JKN telah mengemas kini aset, peralatan, kenderaan, dan logistik yang sedia digerakkan pada bila-bila masa dan stok ubat-ubatan di fasiliti kesihatan adalah mencukupi sekurang-kurangnya untuk tiga bulan, dengan bekalan tambahan tersedia daripada pembekal konsesi.

Pasukan perubatan kecemasan juga bersedia digerakkan, terdiri daripada Pasukan Penilaian Pantas (RAT), Pasukan Tindakan Pantas (RRT), *Medical Emergency Response Team* (MERT) dan Perkhidmatan Kesihatan Mental dan Sokongan Psikososial (MHPSS) untuk menjalankan penilaian kesihatan dan rawatan di PPS, pemantauan penyakit, pemeriksaan persekitaran serta memberikan sokongan psikososial kepada mangsa. - BERNAMA

# Kids face social media ban

Users must be aged 16 years and above from next year

## Staying vigilant:

Fahmi (centre) with participants of an awareness seminar on online scams held yesterday. The seminar was attended by 100 Indian youths from several public housing areas in Lembah Pantai. — FAIHAN GHANI/The Star



By MARTIN CARVALHO  
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**KUALA LUMPUR:** Malaysians below 16 years old will be barred from signing up for social media accounts next year as part of the government's efforts to better protect children online, says Communications Minister Datuk Fahmi Fadzil.

He said the government expects all platform providers to implement electronic know-your-customer identity verification by next year.

The new system will require users to verify their age using official documents such as MyKad, passports or MyDigital ID.

In October, the Cabinet discussed a proposal to raise the minimum age for social media use to 16.

Fahmi said the move aligns

with the Online Safety Act, which comes into force on Jan 1.

He cited Australia which will introduce an age limit on social media next month.

He said Malaysia will study international practices to find the best approach.

"Other countries may have their own ways, and we will look closely to find the best way to ensure that children below 16 are prohibited from using social media," he told reporters after closing an awareness seminar on online scams organised by the Institut Penyiaran dan Penerangan Tun Abdul Razak yesterday.

In the meantime, he urged parents to encourage outdoor activities for children and supervise their use of gadgets.

On issues with the new emergency contact, Fahmi announced that the joint special committee

will meet today to review technical, operational, and inter-agency coordination issues in the Next Generation Malaysian Emergency Response Services 999 (NG MERS 999) system.

The meeting will examine integration with private ambulance services not registered with the Health Ministry and assess the user-friendliness of the new SaveME999 app, which consolidates three previous apps, SaveMEblind, SaveMEdeaf and SaveMEPolice, to provide digital location and emergency information.

Fahmi clarified that the app was not developed at a cost of RM1.25bil.

"It costs about RM880,000 a year to manage the system, most of which goes towards data management, not development," he said, noting that some

private ambulance operators, such as those under activist Chee Heng Kuan, popularly known as Uncle Kentang, are still not registered.

The NG MERS 999 system, which replaced the older MERS999 on Nov 16, is an integrated strategic digital platform that enhances resource and data sharing between emergency call centres and related central agencies, improving emergency service efficiency.

It now covers over 800 locations nationwide, double the number previously under MERS999.

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## Must watch



### United Sikhs Malaysia volunteers to assist Malaysians stranded in Hat Yai

United Sikhs Malaysia volunteers have been mobilised to assist stranded Malaysians in Hat Yai, Thailand.



### Retro Recipe: Crepe manicotti

Delicate Tuscan-style crepes filled with spinach and cheese, rolled into manicotti and baked under a blanket of tomato and molten mozzarella.



## Must read



### INTERACTIVE

### Who will care for the children?

Demand for quality centres is growing – yet more are closing their doors.



# Push for inclusive sex education

## Tailored, comprehensive interventions needed to reduce teen pregnancy

By ARFA YUNUS  
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**PETALING JAYA:** Global research shows that inclusive, age-appropriate sex education drastically reduces teen pregnancies but in Malaysia, most adolescents still lack access to such programmes, prompting experts to call for urgent reforms.

Consultant paediatrician and child advocate Datuk Dr Amar Singh HSS said the recent focus on teenage pregnancies is long overdue, stressing that official figures capture only a fraction of the problem.

He warned that many unintended pregnancies likely end in unrecorded abortions.

The National Health and Morbidity Survey 2022 revealed an alarming picture: 7.6% of teens admitted to having had sex, 5.7% were sexually active at the time of the survey, and 33% had sex before age 14.

Most (88%) did not use any birth control, while 11% had more than one partner, Dr Amar said.

"The knowledge of Malaysian

teens regarding sexual and reproductive health is poor," he said, highlighting that even married teenage pregnancies pose serious health risks and long-term economic consequences.

He called on the government to release more detailed data to identify risk factors such as poverty, school dropout, lack of community support, sexual abuse and substance use so that interventions can be better targeted.

Crucially, he said, Malaysia must focus not just on girls but also boys.

Dr Amar noted that while programmes such as KafeTEEN are beneficial, they reach only a fraction of Malaysian youth.

Between 2006 and 2023, 1.1 million teens participated in the National Population and Family Development Board's reproductive health initiatives, but an estimated seven to eight million adolescents passed through those years.

"The majority of our teens, and probably the higher-risk groups, remain unreachable," he said, arguing that schools are the only platform with nationwide reach.

**"The knowledge of Malaysian teens regarding sexual and reproductive health is poor."**

Datuk Dr Amar Singh

Health Ministry data recorded at ministry facilities between 2020 and 2024 show that 41,842 girls, aged 19 and below, were pregnant. Among them, 16,951 (40.5%) were not married.

Child rights activist Datuk Dr Hartini Zainudin said teenage pregnancy cannot be viewed solely through the lens of poverty.

"It's about what's available to teens and the fact that contraceptives aren't discussed or easily accessible in public," she said.

She cited studies showing that teenage mothers are overwhelm-

ingly more likely to have low educational attainment.

"Pregnant adolescents were over 16 times more likely to have only primary-level education compared to adult mothers," she said, adding that they were also 14 times more likely to be single at the time of delivery.

She called for fully implemented, properly taught comprehensive sexuality education, rather than the "watered-down version" currently in schools.

"The most effective child-protection measures will be those that keep girls in school, empower families and create a coordinated, community-wide support network that is accessible and trusted by young people," she said.

Children's Commissioner at Suhakam, Dr Farah Nini Dusuki, said adolescent brain development continues into the early 20s, making guidance, monitoring and consistent support crucial.

She said current programmes are "commendable", but must be evaluated to determine if they are reaching the intended groups.

"Resilience must be built as early as possible. One-off pro-

grammes or sporadic campaigns are no longer effective," she said, calling for empowerment of parents, teachers and children through both formal and informal platforms, including digital spaces.

She added that sexuality education must evolve with children's capacities, starting with safe-touch lessons in preschool.

Children's Protection Society Malaysia (KL branch) chairman Tengku Datuk Asra Jehan Tengku Azlan highlighted how cultural taboos continue to block access to vital information on pregnancy risks, sexually transmitted diseases and protection.

She said dysfunctional family environments, hardship and poor parental communication heighten risks for teens, stressing that parents must take an active role.

"Compassionate communication over authoritative communication has been proven to be effective.

"A child who feels loved, valued and heard makes better decisions," she said, urging parents to teach self-care, dignity and resilience alongside schools delivering proper reproductive education.

# Youngest kids are the germiest



**DURING** respiratory virus season, colds, flu and other bugs start circulating – especially among the very young.

A recent study confirmed what many families intuitively know: The littlest students harbour the most germs.

Children in pre-kindergarten and elementary school showed highest rates of virus detection compared with older students and staff, according to research published in the journal *Pediatrics*.

"Young children can have up to 10 respiratory viruses a year as their immune systems are introduced to different infections for the first time," said Dr Jennifer Goldman, a paediatrician at Children's Mercy hospital in Kansas City, Missouri, who co-led the study.

Goldman and her colleagues analysed nasal swabs and symptom reports from more than 800 students and staff in a large school district in Kansas City from November 2022 to May 2023.

They found that overall, more than 85% of all participants had at least one respiratory virus detected during that time and

more than 80% had an episode of acute respiratory illness – though not necessarily at the same time.

More telling, 92% of three- to five-year-olds and elementary school kids had a virus detected, compared with about 86% of middle school students, about 77% of high school students and 76% of staff.

Kids age three to five had the highest rates of actual illness, too, the study found.

Most of the viruses were the kinds that cause the common cold, including rhinovirus, which was found in 65% of participants, and types of seasonal coronavirus detected in about 30%. The virus that causes Covid-19 was found in about 15% of those studied.

The new study provides a baseline look at the burden of viruses in school settings, Goldman said.

It also confirms the real-world experience of paediatricians who are parents, like Dr Nicole Torres of the University of Miami Health System.

"I can say this for my own children, who are now in their teens: They were sicker when they were younger," she said.

## Role kids play

The study also squares with older research that found that young kids play a key role in spreading respiratory viruses at home.

Dr Carrie Byington was co-author of a University of Utah study, published in 2015, that recruited 26 households to take nasal samples from everyone living in a home, every week, for a year.

That study found that children younger than five had virus detected for half of the weeks of the year, recalled Byington, who is now with the University of California, San Diego.

"And if you live in a household with multiple children, that proportion just goes higher, so it can appear as if someone is always sick," she said.

Preventing illness in children at school or at home can be tough, experts acknowledge.

Being up to date on vaccinations for Covid-19 and influenza is important, they said.

So is frequent handwashing, learning to cover coughs and keeping hands away from the eyes, nose and mouth. Cleaning



Frequent handwashing, learning to cover coughs and keeping hands away from the eyes, nose and mouth are important to prevent respiratory infections. – Freepik

and sanitising frequently touched surfaces and objects and optimising fresh air are also key.

When little ones do get sick, the best treatment is often supportive care like extra fluids and rest. In serious cases, medical providers may recommend medications to reduce fever or antiviral drugs.

It can take a couple weeks, however, for lingering symptoms like coughs to completely resolve. By then, the child may well have another cold.

"I do tell parents of younger children to expect them to be ill once every month, every month and a half," Torres said. "It'll seem that way." – AP

# Cervical cancer vaccine push has saved 1.4 million lives: Gavi

**A** THREE-YEAR campaign to bring vaccines against human papillomavirus (HPV) to low-income countries has prevented 1.4 million cervical cancer deaths, according to vaccine alliance Gavi.

"About 86 million girls are now protected against the leading cause of cervical cancer, thanks to a concerted three-year effort by Gavi, the Vaccine Alliance and lower-income countries," the organisation said.

It added in a statement to mark World Cervical Cancer Elimination Day that "an estimated 1.4 million future deaths" had been prevented.

Gavi said that across Africa, the coverage rate for the vaccine had risen from four per cent of girls in 2014 to 44 per cent at the end of 2024,

Cancer caused by HPV disproportionately affects low-income countries, which often lack screening services and access to treatment.

These countries accounted for 90 per cent of the 350,000 cervical cancer deaths recorded in 2022, according to Gavi.

The organisation's chief executive Sania Nishtar credited the "incredible commitment" by countries and organisations for helping to reach the target of protecting 86 million girls.

Gavi said that across Africa, the coverage rate for the vaccine had risen from four per cent of girls in 2014 to 44 per cent at the end of 2024,



An estimated 86 million girls are now protected against the leading cause of cervical cancer.

PICTURE CREDIT: FREEPIK

higher than for Europe at 38 per cent. The alliance said it used economies of scale to bring down prices and make vaccines available to about 50 poorer countries.

"Gavi secured commitments from manufacturers to invest in HPV vaccines - and the price of HPV vaccines

in Gavi-supported countries is now between US\$2.90 and US\$5.18 per dose, compared with US\$100 or more elsewhere," said the statement.

"This collaborative effort is driving major global progress towards eliminating one of the deadliest diseases affecting women," Sania said, while

stressing that the cancer still kills a woman every two minutes.

The World Health Organisation officially backed a single-dose HPV vaccination schedule instead of the previous two doses in 2022, allowing twice as many girls to be vaccinated with existing stocks.

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## FORENSIK: PENCARI BUKTI, PENEGAK Keadilan

**D**idorong minat terhadap dunia penyiasatan, menjadi faktor semakin ramai pelajar memilih Sains Forensik sebagai kerjaya masa depan.

Bidang ini menuntut ketelitian, keberanian dan integriti tinggi dalam usaha mengenal pasti bukti serta membantu proses keadilan.

Di Management & Science University (MSU), pelajar bukan sekadar belajar teori tetapi mengikuti latihan makmal, simulasi penyiasatan dan pendedahan industri yang

**KERJAYA MINGGU INI**

mencerminkan realiti kerja sebenar. Pendekatan ini menggabungkan kemahiran teknikal dan insaniah seperti komunikasi serta penyelesaian masalah.

Graduan MSU berpeluang menceburi sektor keselamatan, penyelidikan, kesihatan dan penguatkuasaan undang-undang.

Ikuti perkongsian Sinar Bestari dalam menelusuri dunia unik ini dan melihat bagaimana anak muda membina kerjaya penuh prestij dalam bidang forensik.

*Jom kita!*



## Sebalik bukti, terbit minat

Generasi muda MSU buktikan rasa ingin tahu mampu ubah masa depan



DINA NURHAFFIDHA, ANNA QUSDIUS

**P**elajar Sains Forensik teruja apabila berada dalam bidang yang menguji minda dan memerlukan kecekapan membuat taburan tepat.

Ada yang tertawak dengan kerja analisis makmal dan tidak kurang pula lagam melihat bukti kecil mampu mengisahkan sebuah kes.

Sains Forensik juga destinasi yang mempunyai logik dan rasa ingin tahu dalam sains perubatan perubatan.

Itulah sebabnya, *Sinar Bestari* meneroka selok-selok mengenai cerita inspirasi dan semangat pelajar dalam dunia Sains Forensik ini.



Seorang pelajar Sains Forensik MSU sedang menjalankan ujian makmal. Pelajar Sains Forensik MSU sedang menjalankan ujian makmal. Pelajar Sains Forensik MSU sedang menjalankan ujian makmal.

### Dulu Kejuruteraan, kini Sains Forensik

Pertukaran bidang Kejuruteraan kepada Sains Forensik mangkin kadasteran luar biasa, namun ia perjalanan yang mampu membuka dimensi baharu dalam dunia ilmu.

Pada pelajar sebelum ini sudah terbiasa dengan formula, reka bentuk dan struktur namun kini melangkah ke arena penerbitan saintifik yang menuntut ketelitian, fokus serta kemampuan membuat bukti.

Pelajar Sarjana Muda Sains Forensik Management & Science University (MSU), Amber Aleesa Danny, 23, berkata, perubahan haluan itu membuktikan bahawa minat sebenar mampu mengear bidang yang lebih selak dengan jiwa.

"Saya lebih berminat dengan Sains Forensik kerana mata pelajaran yang terdapat kepada Biologi dan Kimia, manakala bidang Kejuruteraan pula membincangkan Fizik serta Kemahiran Teknikal."

"Apabila dapat tahu saya lebih menyukai Biologi, kenapa tidak? Inilah semangat yang dimiliki. Saya



AMBER ALEESA



HUEY SHYAN



KRUBALANI

juga saksu misteri jadi saya cari kos ini di universiti yang meminati kerjayanya.

"MSU tawarkan bidang ini dan ada banyak lagi perkara yang lebih menarik untuk diketahui seperti teori dan amali," katanya kepada *Sinar Bestari*.

Dengan semangat ingin tahu yang tinggi, mereka mendapati bahawa setiap eksperimen dan analisis bukan sekadar tugasan akademik, tetapi satu usaha mengungkap kebenaran.

### Naluri ingin tahu yang tinggi

Didorong oleh semangat ingin tahu yang tidak pernah padam, namun ramai pelajar memilih merenca dunia Sains Forensik iaitu bidang yang menguji ketahanan minda dan memerlukan kecekapan menganalisis setiap petunjuk dengan penuh teliti.

Bagi pelajar Sarjana Muda Sains Forensik MSU, Loke Huey Shyan, 22, persoalan merupakan peluang untuk mencari jawapan dan setiap misteri menjadi ruang pembelajaran yang membuka lebih banyak pintu pengetahuan.

"Minat mendalam terhadap perubatan saintifik malah mendorong generasi muda hari ini terutama saya untuk mengambungkan pengajaran dalam bidang forensik dan memahami bagaimana bukti kecil mampu meringkaskan cerita besar di sebuah setiap kes."

"Saya mahu tahu segala-galanya. Apabila telah mengetahuinya, kita akan rasa 'wow', 'luar biasa' dan sangat menakutkan untuk sesuatu perkara itu," katanya.

Ditanya tentang masa depannya, Huey Shyan mengakui akan meneruskan pembelajaran dalam bidang ini dan akan memperluaskan forensik dengan lebih mendalam terutama bidang Forensik Maritim.

"Forensik Maritim ini lebih berkaitan dengan kos keselamatan melibatkan air atau perselantaran air."

"Ia bukan sahaja berlaku kepada kemalangan di darat, tetapi juga di air. Jika berpeluang, saya akan memperluaskan lebih lanjut kepada semua orang tentang Forensik Maritim."

"Banyak sebenarnya kes yang berlaku di dalam air tetapi tidak diketahui oleh orang ramai," katanya lagi.

### Misteri di makmal

Setiap kali melangkah ke makmal, suasana penuh fokus dengan eksperimen itulah yang paling menghidupkan rasa minat dalam diri.

Dari kemunculan bekerja dengan sampel sehingga ketelitian mengendalikan peralatan, semuanya membawa kepada keputusan memilih Forensik Toksikologi sebagai hobi pengajaran.

Forensik Toksikologi merupakan satu cabang penting yang memerlukan ketelitian tinggi di dalam makmal.

Itulah impian yang diharapkan Krubalani Maratharanan, 24, selepas memamatkan pelajaran di MSU selepas empat tahun.

Katanya, bidang ini bukan sahaja membuka peluang melakukan analisis, namun ia melibatkan pengurusan pelbagai sampel, bahan dan alat makmal.

"Aktiviti ini benar-benar selak dengan minat dan kecenderungan pembelajaran yang lebih praktikal."

"Bukan itu sahaja, bidang ini akan mengambungkan sebahagian besar elemen sains yang berada dalam makmal dengan baik," katanya.

Krubalani juga mengakui amat minat bekerja di makmal kerana ia merupakan pilihan ini lebih bermakna, sesuai dengan kecenderungan dan kemahirannya.



## TIADA BUKTI SAINTIFIK

# Susuk **tidak** beri kesan biologi: Pakar

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## Kuala Lumpur

**T**idak kajian klinikal atau saintifik yang membuktikan susuk memberi kesan perubahan biologi pada kulit, peningkatan kecantikan, aura, persona dan keyakinan terhasil daripada amalan memakai susuk.

Pakar Dermatologi An-Nur Specialist Hospital Dr Waheeda Diana Abdul Kadir berkata, terdapat beberapa jurnal saintifik yang membincangkan penemuan bahan susuk secara tidak langsung ketika intervensi rawatan rahang terutamanya oleh pakar pergigian.

Menurutnya, susuk atau *charm needles* adalah berasaskan mistik atau berkaitan ilmu halus atau ghaib.

"Dalam pemakaian susuk, logam kecil berunsurkan emas, perak dan tembaga akan dimasukkan ke bawah kulit pemakai.

"Keberkesannya subjektif dan bergantung kepada kepercayaan pemakai. Dalam konteks Islam, amalan susuk amalan syirik," katanya.

Beliau berkata, daripada sudut pandangan pakar dermatologi, masalah kulit akibat susuk boleh dikenal pasti, namun memerlukan maklumat lengkap daripada pemakai dan peme-



SUSUK atau *charm needles* adalah berasaskan mistik atau berkaitan ilmu halus atau ghaib.

riksaan fizikal.

Beliau menyorankan biopsi kulit dilakukan untuk mengesahkan sama ada pemakaian susuk menyebabkan pembentukan *foreign body granuloma* atau reaksi alahan.

Jelasnya, susuk boleh

menyebabkan komplikasi kulit dan kesihatan dalam jangka masa panjang jika tidak dikeluarkan.

"Ini kerana ia bertindak sebagai benda asing *foreign body* di bawah kulit pemakai dan boleh memberi impak negatif terhadap tubuh

badan.

"Antara komplikasi kulit jangka panjang termasuk keradangan kronik, pembentukan *foreign body granuloma*, benjolan di kawasan susuk, alahan yang boleh menyebabkan kulit menjadi merah, bengkak atau bernanah dan risiko infeksi kulit selain sistemik jika lebih serius.

"Pemakaian susuk di tempat yang salah boleh juga merosakkan saraf atau otot," katanya.

Dr Waheeda Diana berkata, jika berlaku reaksi tubuh yang berpanjangan atau infeksi, pembuangan susuk adalah dinasihatkan melalui pembedahan kecil.

Katanya lagi, walaupun era modenisasi mengangkat kecantikan, susuk bukanlah solusi ideal atau selamat untuk penampilan, sebaliknya membawa risiko kesihatan yang serius dan amalan syirik.

"Antara pilihan yang semakin popular ialah *skin booster* dan suntikan bahan seperti asid hialuronik ke dalam kulit untuk meningkatkan kelembapan dan keanjalan kulit.

"Kajian klinikal juga membuktikan suntikan *skin booster* ini dapat memperbaiki tekstur kulit dan keserian kulit secara semulajadi.

"Picolaser pula menggunakan teknologi laser yang sangat pantas untuk merawat pigmentasi, parut dan memperbaharui tekstur kulit," katanya.

## Early detection, school-based interventions key to curb disease

**PETALING JAYA:** Early detection and healthier school environments must become national priorities if Malaysia is to curb the rising tide of childhood diabetes, said Universiti Malaya Medical Centre Senior Consultant Paediatric Endocrinologist Prof Dr Muhammad Yusef Jaludin.

He said prevention must begin long before children end up in hospitals.

"Early screening and school-based interventions are absolutely key to reducing the long-term burden of diabetes in our children."

"The earlier we detect risks such as obesity, insulin resistance or abnormal blood sugar levels, the better our chances of preventing or delaying complications," he said.

He outlined several measures that could be applied nationwide.

1. **Strengthen school health screenings.** Annual BMI, waist circumference and blood pressure checks, with flagged cases referred to primary care. The National Physical Fitness Standard Test should be enhanced as an early detection option.

2. **Introduce targeted glucose screening.** Simple finger-prick tests for overweight children or those with family history or signs of insulin resistance.

3. **Improve canteen offerings.** Integrate lifestyle education, ensure regular exercise and involve parents.

4. **Train teachers and school nurses** to recognise early warning signs such as excessive thirst, frequent urination and unexplained weight loss.

5. **Integrate data systems.** Record screening results into national registries. Muhammad Yusef also highlighted the MyBFF@school programme as a successful research-backed initiative ready for nationwide rollout.

"These are achievable steps. They don't require new hospitals. They require coordination, awareness and consistent implementation," he said.

"If we start screening and educating early, we can dramatically reduce the number of children who develop Type 2 diabetes, and help those with Type 1 diabetes live healthier, complication-free lives."

"Early action today means a healthier generation tomorrow."

Beyond clinical care, he said Malaysia must confront broader societal factors driving childhood diabetes.

He called for attention on the following areas.

1. **Healthy food environments** - stronger regulations on marketing sugary foods, expanding the sugar tax, improving school canteen guidelines.

2. **Stronger health education** - nutrition and lifestyle lessons from early primary school, with parental involvement.

3. **Build environments that encourage activity** - safe parks, cycling paths and sports facilities.

4. **Mandatory school screenings** - with intervention services and national registry integration.

5. **Cross-agency coordination** - enlisting Education, Youth and Sports, Local Government and Agriculture ministries.

"We need a whole-of-society approach combining policy, education and community action. If we act boldly today through smarter policies and stronger community engagement, we can turn the rising curve of childhood diabetes around." - **By KIRITINEE RAMESH**

# Childhood diabetes crisis more serious than records show

➤ Clinical trends over past five years point to clear rise in both Type 1 and Type 2 cases among children and adolescents, says senior consultant paediatric endocrinologist

By KIRITINEE RAMESH  
www.nst.com.my

**PETALING JAYA:** Malaysia may be facing a far more serious childhood diabetes crisis than official records suggest, with clinicians nationwide reporting more frequent and more severe cases since the last national data was published in 2019, said Diabetes Malaysia president Prof Dr Muhammad Yusef Jaludin, who is also Universiti Malaya Medical Centre senior consultant paediatric endocrinologist.

He said clinical trends over the past five years point to a clear rise in

both Type 1 and Type 2 diabetes among children and adolescents.

"Since 2019, we have seen a steady increase in new diagnoses. Globally and regionally, Type 1 diabetes has been rising by about 3% to 5% annually, and Malaysia is likely following the same pattern."

"For Type 2 diabetes, the rise appears to be even steeper, driven by childhood obesity, sedentary lifestyles and dietary habits."

He said paediatric endocrinologists nationwide are reporting younger patients with diabetes - often with more severe symptoms - a trend that accelerated

after Covid-19 disrupted routine health screenings and physical activity.

"While we await updated national surveillance, the clinical picture is clear - the numbers are going up."

"We urgently need to intensify early detection, prevention and education efforts rather than wait for new statistics."

"Every child must have access to screening and healthier environments," he said, while stressing that updating and maintaining a national childhood diabetes registry must now be a top priority for the Health Ministry.

"Without current data, we are essentially flying blind."

"A registry is not just about numbers - it saves lives."

"It tells us where the burden is growing, who is most affected and whether our interventions are working."

However, he said there are

persistent challenges, including inconsistent reporting, under-reporting of milder cases, data standardisation issues and the absence of integrated electronic medical records across states.

"Many childhood diabetes cases are managed outside tertiary centres and may not be captured."

"But with proper investment in digital infrastructure and systematic reporting, it is achievable," he said, adding that Diabetes Malaysia is ready to work with the ministry and specialists to strengthen national surveillance.

He emphasised that data must also reach policymakers and educators.

"Childhood diabetes is everyone's concern."

Muhammad Yusef confirmed a worrying rise in Type 2 diabetes among children - once considered rare in the young.

"We are definitely seeing more Type 2 diabetes in children, sometimes in those as young as 10 or 11," he said.

"The pandemic accelerated the problem. Long periods of school closure, decreased physical activity, increased screen time and easier access to calorie-dense foods led to significant weight gain."

More children are also being afflicted with complications such as fatty liver disease and hypertension.

"This shows that many children are not being screened early enough," Muhammad Yusef said.

He warned that the trend is both real and significant, calling for comprehensive prevention programmes in schools, greater parental awareness and early screening in primary care.

"Diabetes Malaysia wants to do more, by working with schools, communities and national agencies to promote healthier lifestyles. But this must be a nationwide effort."

"If we act now, by combining education, early screening and supportive environments, we can reverse this trajectory and protect the next generation," he said.



Muhammad Yusef said there is an urgent need to intensify early detection, prevention and education efforts as every child must have access to screening and healthier environments. - ADAM AMR HAMZAH/THESUN

## More Type 2 cases among children alarming: Expert

**PETALING JAYA:** Malaysian children are now being diagnosed with Type 2 diabetes as young as eight years old, a shift paediatric specialists describe as unprecedented and deeply alarming.

KJ Somers Specialist Hospital 2 Head of Paediatrics and Consultant Paediatric Endocrinologist Assoc Prof Dr Rashdan Zaki Mohamed said the trend has become increasingly evident in recent years, driven largely by childhood obesity and lifestyle changes.

"We are seeing more new Type 2 diabetes cases among children, and in some instances, the patients are only eight to 10 years old," he said.

"Previously, it was mostly teenagers. This shift is extremely worrying."

Rashdan said Type 1 diabetes cases also appear to be increasing, but the pace of early-onset Type 2

diabetes - once exceptionally rare in young children - demands urgent national attention.

He warned that Malaysia is still relying on childhood diabetes data from 2019, which no longer reflects the reality clinicians are observing daily.

"A comprehensive national registry is crucial," he said.

"Without updated data, we cannot plan effectively, allocate resources properly or understand how the post-pandemic landscape has changed childhood disease patterns."

He added that early symptoms often go unnoticed, especially outside major cities, where awareness remains limited.

To help parents and even healthcare workers recognise possible diabetes, he uses the "3 Ts" - Thirst (frequent urination), Thinner

(sudden weight loss), Tired (constant drinking), Tired (easy fatigue) and Test (check blood sugar immediately).

"These simple signs can save lives," he said.

Although diagnosing diabetes through a finger-prick test is straightforward, distinguishing between Type 1 and Type 2 requires more advanced investigations such as diabetes antibodies and C-peptide tests - tools not consistently available nationwide.

Rashdan urged the Health Ministry to make early detection and better long-term support for children a priority.

He recommended creating a unified national registry accessible to both public and private facilities, and subsidising essential diabetes tools, including insulin and continuous glucose monitors and requiring

insurers to provide coverage for Type 1 diabetes.

He also called for stronger policies to combat childhood obesity, including stricter rules for school canteen vendors, banning unhealthy food and drinks in and around school grounds and restricting fast-food advertising near schools.

"Government, healthcare providers, schools, insurers and families - everyone has a role."

His message to parents was direct, urging them to take a proactive role in safeguarding their children's health.

"We must work together to prevent childhood obesity, which is driving Type 2 diabetes."

"For Type 1 diabetes, early detection, proper treatment and access to modern technologies are essential for the best outcomes." - **By KIRITINEE RAMESH**

# MADANI MEDICAL SCHEME EXPENDITURE HITS RM33.9 MILLION AS OF SEPTEMBER

The total expenditure under the Madani medical scheme implemented in 10 districts has reached RM33.9 million as of Sept 30, Deputy Health Minister Datuk Lukmanman Awang Sauni said. Based on current expenditure projections, it is expected to reach RM50 million by year-end after settling claims from clinics involved in the programme, a pioneer initiative by the ministry to support the health needs of the B40 group for acute primary care services, where qualified recipients can receive free treatment at private clinics registered under the scheme. — Bernama

# PENANG LAUNCHES EPINTAS-SEHAP APP TO BOOST DENGUE SURVEILLANCE

Penang has introduced the Penang Information and Complaints System (ePintas) - State Environmental Health Action Plan (Sehap) online application to monitor dengue cases in the state. Chief Minister Chow Kon Yeow said ePintas-Sehap is an integrated platform that combines the state government's ePintas system with a dengue case management and monitoring module developed by the Penang State Health Department. — Bernama

# SELANGOR SEES 63.8% DROP IN DENGUE CASES, STRENGTHENS CONTROL MEASURES

Selangor has recorded a significant decline in dengue fever cases, with 20,309 cases reported up to Epidemiological Week 45/2024 - a reduction of 36,001 cases or 63.8% compared to 56,400 cases during the same period last year. Dengue-related fatalities also showed a notable decline, with six deaths reported this year compared to 14 in the corresponding period in 2024. State Public Health and Environment Committee chairman Jamaliah Jamaluddin said the latest figures demonstrated that the continuous efforts of the state government, together with relevant agencies and departments, to strengthen dengue control and prevention measures have begun to show positive impact. — Bernama



Smoking introduces harmful chemicals into your mouth. — ALL PICS FROM I23W

## Smoking, gum disease

Partners in crime against your mouth

**W**HEN it comes to damaging your oral health, few factors are as destructive as smoking and gum disease. Together, they form a silent but deadly partnership that attacks the very foundation of your teeth - the gums and the bone that support your teeth.

### How smoking backs fire

Every puff of cigarette smoke introduces thousands of harmful chemicals into your mouth. These toxins do not just stain your teeth or cause bad breath - they weaken your body's natural defense system. Smoking reduces your immune response, making it much harder to fight the bacteria responsible for gum infection (periodontitis).

To make matters worse, smoking reduces blood flow to the gums as the blood vessels become constricted due to the smoke produced by



From left: Normal tooth and periodontitis.

smoking. This means less oxygen and fewer nutrients reach the gum tissue - the very things needed for repair and healing. As a result, infections linger longer and wounds heal more slowly.

### Bacteria thrive where oxygen dies

Smoking creates an oxygen-poor environment in the mouth. This lack of oxygen gives rise to harmful bacteria that thrive deep under the gums. These bacteria produce toxins that destroy gum tissue and the bone that holds teeth in place. Over time, what begins as mild gum inflammation can progress to serious gum disease - with loose teeth, bleeding gums and eventually tooth loss.

### Vicious cycle

Once gum disease sets in, it further amplifies the harm caused by smoking. The inflamed and infected gum tissues release inflammatory substances that speed up bone loss and tissue destruction. This means that the longer a person continues to smoke, the faster the damage progresses.

The relationship is bidirectional - smoking makes gum disease worse and gum disease magnifies the damage done by smoking. It is a cycle of destruction that does not just end in the mouth.

### More than just mouth problem

Gum disease in smokers is not just about losing teeth - it is a reflection of deeper health risks. The same bacteria and inflammatory chemicals that harm your gums can travel through the bloodstream, increasing the risk of heart disease, stroke, diabetes complications and even certain cancers. What happens in the mouth does not stay in the mouth - it affects the whole body.

### Breaking partnership

The good news is that this destructive alliance can be broken. Quitting smoking is the single most powerful step you can take for your oral and overall systemic health. Within weeks of quitting, blood flow improves, oxygen returns to the tissues and your body's ability to heal strengthens.

Combine this with:

- Regular professional

### dental cleanings

- Brushing twice daily and flossing
- Using antiseptic mouth rinses when required
- Routine dental check-ups

...and you will be giving your gums the best chance to heal and your teeth a chance to thrive.

### Message to community

Whether you smoke or know someone who does, remember: gum disease is preventable and recovery is possible.

Awareness is the first step. By understanding how smoking and gum disease work together to destroy oral health, we can make informed choices, support loved ones in quitting and promote healthier, brighter smiles across our communities.

Your mouth deserves better - break the partnership between smoking and gum disease before it breaks your health.

This article is contributed by Dawson Swaminathan, who is an advocate of oral healthcare for all.

## Human patient receives first 3D-printed cornea

**F**OR the first time, a legally blind patient has received a 3D-printed cornea made of human eye cells in a successful start to an early-stage trial, implant manufacturer Precise Bio has reported.

Cornea transplants currently require eye tissue from human donors. As with all tissue and organ transplants, demand often outweighs the supply.

The 3D printing process allows hundreds of lab-grown implants to be derived from cells from a single donor cornea, the researchers said.

"For the first time in history, we've witnessed a cornea created in the lab,

from living human cells, bring sight back to a human being.

"It was... a glimpse into a future where no one will have to live in darkness because of a shortage of donor tissue," lead surgeon Dr Michael Mirmiran of Rabin Medical Centre in Israel said in a statement.

The ongoing Phase 1 trial will ultimately test the PVEK corneal implant in 10 to 15 patients. Precise Bio, which is based in North Carolina and has operations in Israel, expects to announce initial results from the study in the second half of 2026. — Reuters